

FINANCIAL AFFIDAVITCJA 23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES ☐ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)
HE CASE OF

FOR

AT

LOCATION NUMBER

VS.

PERSON REPRESENTED (Show your full name)

*Anibal Torres*CHARGE/OFFENSE (describe if applicable & check box →) ☐ Felony ☐ Misdemeanor

- ☐ Defendant - Adult
☐ Defendant - Juvenile
☐ Appellant
☐ Probation Violator
☐ Parole Violator
☐ Habeas Petitioner
☐ 2255 Petitioner
☐ Material Witness
☐ Other (Specify)

DOCKET NUMBERS

Magistrate

03m-1158-JES

District Court

Court of Appeals

ETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Am Self Employed
		Name and address of employer: <i>Owner of Record Store</i>
		IF YES, how much do you earn per month? <i>\$1500</i> IF NO, give month and year of last employment How much did you earn per month? \$
		If married is your Spouse employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	IF YES, GIVE THE VALUE AND DESCRIBE IT	

DEBTORS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <i>3</i>	List persons you actually support and your relationship to them <i>Pauline Torres 16</i> <i>Jake Torres 12</i> <i>Sophia Torres 8</i>		
		DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME	Creditors	Total Debt	Monthly Pay.
				<i>Rent Home</i>	<i>\$1200</i>	\$
				<i>New Store</i>	<i>\$125</i>	\$
				<i>Child Support</i>	<i>\$150</i>	\$
				<i>Utilities</i>	<i>\$50</i>	\$

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)*Anibal Torres*